



OFFICIAL COMMUNICATION

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San Diego, CA 92121
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Facsimile Transmittal

DATE: February 4, 2005
TO: Amendment
Commissioner for Patents
ATTN: Examiner: Duy Le
Art Unit: 2685

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FAX NUMBER: (703) 872-9306

FROM: George C. Pappas, Attorney for Applicant
Registration No. 35,065

Total Number of Pages Sent: 13 (including this transmittal cover sheet)

FILING BY FACSIMILE:

ATTORNEY DOCKET NO.: 020103
ENCLOSED ARE:
• Amendment (10 pages)
• Transmittal (in duplicate)

APPLICANT: Peter Shah
ASSIGNEE: QUALCOMM Incorporated
SERIAL NO.: 10/066,115
FILED: February 2, 2002
FOR: DISTORTION REDUCTION CALIBRATION

Please contact George Pappas at (858) 337-5413 if all pages do not transmit.

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PTO/SB/21

U.S. Department of Commerce
Patent and Trademark Office
PATENT

AMENDMENT TRANSMITTAL FORM

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450Customer No.: 23696
Attorney Docket No.: 020103
In Re Application of: Peter Shah
Serial Number: 10/066,115
Filed: February 2, 2002
Examiner: Duy Le
Group Art Unit: 2685

Dear Sir:

Transmitted herewith for filing is a Response to Office Action in the above identified application.

CLAIMS	(a) Number Remaining After Amendment	(b) Highest Number Previously Paid For	(c) Extra Claims	Large Entity Fee	Fee Paid
Total*	46	46	0	x \$50 =	\$0
Independent**	4	9	0	x \$200 =	\$0
Multiple Dependent Claim(s): <input type="checkbox"/> Yes <input type="checkbox"/> No				\$360	\$
EXTENSION FEES				<input type="checkbox"/> One Month	\$120
				<input type="checkbox"/> Two Months	\$450
				<input checked="" type="checkbox"/> Three Months	\$1020
TERMINAL DISCLAIMER				\$130	\$
				TOTAL FEE	\$1020

*If the number in column a is less than 20, enter 0 in column c.

**If the number in column a is less than 3, enter 0 in column c.

4. ☐ Fee check in the amount of \$_____ is enclosed to pay for any claim and/or extension fees.
5. ☒ Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$1020.
The Commissioner is hereby authorized to charge payment of any additional fees that may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
6. ☒ The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.23(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: February 4, 2005

Signature: _____

George C. Pappas
858-337-5413QUALCOMM Incorporated
Attn: Patent Department
5775 Morehouse Drive
San Diego, California 92121-1714
Telephone: (858) 658-5787
Facsimile: (858) 658-2502

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

I hereby certify that this correspondence is, on the date shown below, being:

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- ☐ deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Depositor's Name: _____
(type or print name)

Date: February 4, 2005

FACSIMILE

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Depositor's Name: George C. Pappas
(type or print name)

Signature: _____

PTO/SB/21

U.S. Department of Commerce
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PATENT

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(type or print name)

Signature: _____

Appl. No. 10/066,115
Amdt. dated 2/4/05
Reply to Office Action of 8/4/04

PATENT
Docket: 020103

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of

Peter Shah

Serial No. 10/066,115

Filed: February 1, 2002

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For: **DISTORTION REDUCTION
CALIBRATION**

2685

) Group No.

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FEB 04 2005

AMENDMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated August 4, 2004, the time for responding having been extended until **February 4, 2005**, please amend the above-identified application as follows:

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

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(type or print name)

Date: 2/4/05

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Depositor's Name: George C. Pappas
(type or print name)

Signature: 